

HCPH RWGA Grants Management

HC PUBLIC HEALTH – RYAN WHITE GRANT ADMINISTRATION

REQUEST FOR EQUIPMENT PURCHASE

All sections must be completed and typed. No handwritten forms will be accepted.

This form should be approved **prior** to the purchase of equipment above \$500 as stated in contract. Unless initially listed and approved in the contract, prior written approval from the County is required for any additions to or deletions of approved equipment purchases having an acquisition cost exceeding \$500.00 (price plus tax). This form is available at www.hcphtx.org/rwga under the Grants Management, Forms & Instructions link.

NAME OF SUBRECIPIENT:

SERVICE:

FUND NO:

CONTRACT NO:

CONTRACT PERIOD:

DESCRIPTION OF EQUIPMENT	COST
1.	\$
2.	\$
3.	\$
4.	\$

PURPOSE/LOCATION OF PROPOSED EQUIPMENT:

Submit to RWGA Grants Management via fax (832) 927-0168 or email to hivacct@phs.hctx.net

Submitted by (print name): _____

Signature

Date

☐ APPROVED

☐ DISAPPROVED

Manager, Ryan White Grant Administration

Date

With the modifications stated below (for use by RWGA only):